APPLICATION DATA SHEET

Application Information

Secrecy Order in Parent Appl.::

| Application Number:: | |
|----------------------------------|-------------------------|
| Filing Date:: | April 1, 2004 |
| Application Type:: | Regular |
| Subject Matter:: | Utility |
| Suggested Classification:: | |
| Suggested Group Art Unit:: | |
| CD-ROM or CD-R?:: | |
| Number of CD Disks:: | |
| Number of Copies of CDs:: | |
| Sequence Submission?:: | |
| Computer Readable Form (CFR)?:: | |
| Number of Copies of CFR:: | |
| Title:: | Rib Truss for Container |
| Attorney Docket Number:: | 29953-199349 |
| Request for Early Publication?:: | |
| Request for Non-Publication?:: | |
| Suggested Drawing Figure:: | 1-3 |
| Total Drawing Sheets:: | 2 |
| Small Entity?:: | N |
| Latin Name:: | |
| Variety Denomination Name:: | |
| Petition Included?:: | |
| Petition Type:: | |
| Licensed US Govt. Agency:: | |
| Contract or Grant Numbers:: | |

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship:: US

Country:: USA

Status:: Full Capacity

Given Name:: Bret

Middle Name::

Family Name:: Sabold

Name Suffix::

City of Residence:: Bernville

State or Province of Residence:: PA

Country of Residence:: 19506

Street of Mailing Address:: 242 Grandview Rd.

PA

19506

City of Mailing Address:: Bernville

State or Province of Mailing

Address::

Country of Mailing Address:: USA

Postal or Zip Code of Mailing

Address::

Applicant Authority Type:: Inventor

Primary Citizenship:: US

Country:: USA

Status:: Full Capacity

Given Name:: Angie

Middle Name::

Family Name:: Noll

Name Suffix::

City of Residence:: York

State or Province of Residence:: PA

Country of Residence:: USA

Street of Mailing Address:: 1840 lvy Pump Lane

City of Mailing Address::

State or Province of Mailing PA

Address::

Country of Mailing Address:: USA

Postal or Zip Code of Mailing

Address::

17404

York

Applicant Authority Type:: Inventor

Primary Citizenship:: US

USA Country::

Status:: **Full Capacity**

Given Name:: Paul

Middle Name::

Family Name:: Kelley

Name Suffix::

City of Residence:: Thurmont

State or Province of Residence:: MD

USA Country of Residence::

Street of Mailing Address:: 42 Catoctin Highlands Circle

MD

City of Mailing Address:: Thurmont

State or Province of Mailing

Address::

Country of Mailing Address:: **USA**

Postal or Zip Code of Mailing

21788

Address::

Correspondence Information

Correspondence Customer 26694

Number::

(202) 344-4000

Phone Number::

(202) 344-8300

E-Mail Address::

Fax Number::

JAKaminski@venable.com

Representative Information

Representative Customer

26694

Number::

Domestic Priority Information

| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|---------------|-------------------|----------------------|----------------------|
| | Continuation of | | |

Foreign Priority Information

| Country:: | Application Number:: | Filing Date:: | Priority Claimed:: |
|-----------|----------------------|---------------|--------------------|
| | | | |
| | | | |
| | | | |

Assignee Information

Assignee Name::

Graham Packaging Company, L.P.

Street of Mailing Address::

2401 Pleasant Valley Road

City of Mailing Address::

York

State or Province of Mailing

PA

Address::

Country of Mailing Address::

USA

Postal or Zip Code of Mailing

17402

Address::